Exhibit 6-1 Disaster Recovery CDBG Supplemental Grants

| Guide for Review of Disaster Recovery CDBG Supplemental Grants | | | |
|--|------|--|--|
| Name of Program Participant: | | | |
| • | | | |
| Staff Consulted: | | | |
| | | | |
| Name(s) of | Date | | |
| Reviewer(s) | | | |

NOTE: All questions that address requirements contain the source of the requirement (statute, regulation, NOFA, or grant agreement). If the requirement is not met, HUD must make a finding of noncompliance. All other questions (questions that do not contain the citation for the requirement) do not address requirements, but are included to assist the reviewer in understanding the participant's program more fully and/or to identify issues that, if not properly addressed, could result in deficient performance. Negative conclusions to these questions may result in a "concern" being raised, but not a **"finding."**

Instructions:

This exhibit is designed to monitor disaster recovery grants, across all years, but not the regular CDBG programs (State or Entitlement). To monitor a disaster recovery grant, obtain copies of the appropriate *Federal Register* Notice(s) with the waivers and alternative requirements as referenced in the program participant's Grant Agreement. Compare the Notice(s) to the appropriate CDBG monitoring Exhibits in Chapters 3 and 4 for the topic under review and mark "NA" any questions that do not apply based on the waivers or alternative requirements in the Notice.

Questions:

1.

| Are all grant activities related to the direct effects of the disaster(s) for which | | |
|---|-----|----|
| the supplemental appropriation was made? | Yes | No |
| [Grant Agreement and the applicable supplemental appropriation and Federal | | |
| Register Notice for the grant] | | |
| Describe Basis for Conclusion: | | |
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| | Is the program participant current in submitting quarterly reports in the Disaster Recovery Grant Reporting (DRGR) system? | Yes | No |
|----|---|-----|----|
| | [Applicable Notice for the grant] Describe Basis for Conclusion: | | |
| | Describe Dusis for Conclusion. | | |
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| | | | |
| | | | |
| 3. | | | |
| | Is the program participant current in submitting annual financial summary | | |
| | reports in the Disaster Recovery Grant Reporting (DRGR) system? | Yes | No |
| | [Applicable Notice for the grant] Describe Basis for Conclusion: | | |
| | Describe Dusis for Conclusion. | | |
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| | | | |
| 4 | | | |
| 4. | | | |
| | Duplication of benefits: If the program participant has an activity that provides federal financial assistance to persons, business concerns, or other entities | | Ш |
| | suffering losses as a result of a major disaster or emergency, has the program | Yes | No |
| | participant assured that no such person, business concern, or other entity will | | |
| | receive such assistance with respect to any part of such loss as to which he or | | |
| | she has received financial assistance under any other program or from insurance or any other source? | | |
| | [Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42USC | | |
| | 5155] | | |
| | Describe Basis for Conclusion: | | |
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